



Minnesota Office of
**Environmental
Assistance**

520 Lafayette Road N, Floor 2
Saint Paul, MN 55155-4100
651-296-3417 • fax 651-215-0246
toll-free 800-657-3843
<http://www.moea.state.mn.us>



Waste Source Reduction: Hospital Case Study



***Itasca Medical Center
126 First Avenue SE
Grand Rapids MN 55744***

The Itasca Medical Center is a 108-bed community hospital with an attached 35-bed convalescent nursing care facility. The hospital made a commitment to source reduce its waste as much as possible. Secondly, what they could not reduce they committed themselves to recycle.

The project demonstrates that source reduction is a viable waste management method for hospitals. Measurement of cost changes and waste prevented took place on a product by product basis. Product waste was measured through the hospitals use and disposal of a product and did not attempt to measure waste produced through the manufacturing process of the product. The hospitals goal was simple: Reduce the amount of solid waste generated by the facility.

As a result of reduction actions alone, the hospital personnel is preventing **238 cubic yards** and over **10,700 pounds** of waste. Not including the savings from avoided disposal fees, these actions result in a **\$11,030 yearly cost savings for the hospital.**

Reduction is defined as any activity that reduces waste at its source. Staff examined their own waste stream and brainstormed ideas to accomplish reduction. As they looked at their waste stream, they asked themselves the following questions:

- Where can I **REDUCE** the amount or the toxicity of material used to accomplish any task?
- Are there existing or new products I can **REUSE** over and over again?
- Are there existing or new products that are repairable, refillable or more durable to give a **LONGER USEFUL LIFE**?

These are the three pillars on which they based their efforts to reduce the amount of solid waste generated by their facility. The specific measures they identified are contained within this report.

This project was a team effort involving virtually all of the supervisors and staff at the hospital and had complete support of the director, David Triebes. Without their suggestions and implementation of the actions reported here, unnecessary waste would continue. Jim Thibodeau of purchasing and Judy Mager of dietary gave outstanding leadership for the project. Without this leadership the project would not have been possible. Technical support for the case study was provided by Kenneth Brown of the Minnesota Office of Environmental Assistance, 651-215-0241 (formerly the Minnesota Office of Waste Management).



USE REUSABLE INSTEAD OF SINGLE-USE CAFETERIA SALAD PLATES

Although reusable plates are used to serve most food, the cafeteria served salads on single-use plates. Now salads are served on reusable dishes as well. As a further measure to reduce waste, cafeteria customers pay by the ounce for the salad they serve themselves, cutting down on food waste.

Volume of waste avoided: 36 cu yd/yr: A 99% volume reduction

SINGLE-USE: 8" single-use plate; 55 cases/yr x 3,316 cu"/case = 182,380 cu" shipping volume. Actual disposal volume of 25 plates is 1,760 cu" for 25 plates.

6" single-use plate; 9 cases/yr x 2,100 cu"/case = 18,900 cu" shipping volume; Actual disposal volume of 32,000 plates was calculated to be $32,000 \div 25 = 1,280 \times 1,760 \text{ cu"} = 2,252,800 \text{ cu"}/\text{yr}$, x 90% to allow for dumpster settling = 2,027,520 cu"/yr. Percent increase from shipping to disposal volume = $2,027,520 - (182,380 + 18,900) \div 2,027,520 = 90\%$ increase.

REUSABLE: measures 8.5" diameter x .375" thick. $\pi r^2 \times h = v$; $3.14 \times 4.245 \times .375 = 21.26 \text{ cu" ea}$; $21.26 \text{ cu" x } 72 \div 3 \text{ yr life} = 510 \text{ cu"}/\text{yr}$

Net: $2,027,520 - 510 = 2,027,010 \text{ cu"} \div 56,656 \text{ cu"}/\text{cu yd} = 35.8 \text{ cu yd}/\text{yr}$

$2,027,520 - 510 \div 2,027,520 = 99\%$ volume reduction

Weight of waste avoided: 1,235 lbs/yr: 99% weight reduction /yr

SINGLE-USE: 8" single-use plate; 20 lbs/case of 500, 55 cases/yr = 1,100 lbs

6" single-use plate; 15 lbs/case of 500, 9 cases/yr = 135 lbs; 1,235 total lbs/yr

REUSABLE: plate weighs 5.625 oz x $72 \div 3 \text{ yr life} = 135 \text{ oz}/\text{yr}$

Net: $1,235 \text{ lbs} - (135 \text{ oz} \div 16 \text{ oz}/\text{lb}) = 1,226 \text{ lbs}/\text{yr}$ reduction;

$1,226 \div 1,235 = 99\%$ weight reduction

Cost savings, not including avoided disposal fees: \$2,126 /yr: 94% cost savings /yr

SINGLE-USE: 6" plate, \$275/yr + 9" plate, \$1,980/yr = \$2,255 /yr

REUSABLE: 72 plates purchased @ \$2.08 ea = \$150, $\div 3 \text{ yr life} = \$50 / \text{yr}$

Washing cost: 14 plates /rack; 2.5 gallons of water is used /rack; 1/154 of electricity /rack; 3.54 of soap /rack.

32,000 single-use plates were used/ yr, $\div 14 \text{ plates}/\text{rack} = 2,285 \text{ racks}/\text{yr}$.

Water: $2,285 \text{ racks} \times 2.5 \text{ gallons} = 5,713 \text{ gallons}/\text{yr} \times (\$2.47 \text{ per } 1000 \text{ gallons for water and sewer combined}) = \$14.11 / \text{yr}$

Electricity: $2,285 \text{ racks} \times 1/154 (.0066) = \$15 / \text{yr}$

Soap: $2,285 \text{ racks} \times 3.54 (.035) = \$79.97 / \text{yr}$

Net: Single-use \$2,255 - (Reusable \$50 + \$14 + \$15 + \$80) = \$2,126 savings /yr

INDIRECT COSTS: Old reusable plates are given to Goodwill for reuse, no disposal cost. On large volume days, maintenance was called to empty cafeteria trash cans one to two extra times /wk. With reusables, extra pick-ups have ceased. A reduction of 36 cu yd/yr x \$6.25/yd gives a theoretical savings of \$225 /yr. However, contracted hauling volume was not decreased due to this action alone.

There was a decrease in labor for purchasing and maintenance departments. in managing and handling this waste. There was an increase in labor for dietary to handle the reusables. Existing staff integrated this action. There were no staff changes for the hospital as a whole.



REUSABLE DESSERT DISHES REPLACE SINGLE -USE

Small ceramic dishes are now used instead of plastic, single-use dessert cups. Nurses report that patients appreciate the change to the use of the more substantial ceramic dishes because they convey a more positive feeling than the thin plastic trays.

Volume of waste avoided: 62 cu yd/yr: 99% volume reduction

SINGLE-USE: Two sizes were replaced. Tray one: $138 \text{ /day} \times 365 \text{ days/yr} = 50,370 \text{ dishes/yr}$ with a shipping volume of 80 cu" versus 1,430 cu", actual disposal volume for 50 trays (a 94.4% volume increase). $50,370 \text{ trays/yr} \div 50 = 1,007.4$, $\times 1,430 \text{ cu" for 50 trays,} \times 90\% \text{ (dumpster settling allowance)} = 1,296,524 \text{ cu"/yr}$

Tray two: $246 \text{ /day} \times 365 = 89,790 \text{ dishes/yr}$ with a shipping volume of 65 cu" versus 1,375 cu", actual disposal volume for 50 trays (a 95.3% volume increase). $89,790 \text{ trays/yr} \div 50 = 1,795.8$, $\times 1,375 \text{ cu" for 50 trays,} \times 90\% \text{ (dumpster settling allowance)} = 2,222,302 \text{ cu"/yr}$

$1,296,524 + 2,222,302 = 3,518,826 \text{ cu"/yr}$

REUSABLE: 400 needed, measuring 4" x 2.75" x 1.5" = 16.5 cu in each. Life is 3 years, $400 \div 3 = 133.3 \text{ /yr}$, $\times 16.5 \text{ cu" } = 2,200 \text{ cu"/yr}$

Net: $3,518,826 \text{ cu" } - 2,200 \text{ cu" } = 3,516,626 \text{ cu"/yr} \div 56,656 \text{ cu"/yd} = 62 \text{ cu yd/yr volume reduction; } 3,516,626 \div 3,518,826 = 99\% \text{ reduction}$

Weight of waste avoided: 1,230 lbs/yr: 96% weight reduction

SINGLE USE: Tray one; 6.1 oz for 50; $50,370 \text{ used /yr} \div 50 = 1,007.4$, $\times 6.1 \text{ oz} = 6,145 \text{ oz/yr}$

Tray two; 8 oz for 50; $89,790 \text{ used/yr} \div 50 = 1,795.8$, $\times 8 \text{ oz} = 14,366 \text{ oz/yr}$

$6,146 + 14,366 = 20,512 \text{ oz/yr}$

REUSABLE: 6.26 oz each $\times 133.3 \text{ /yr} = 833 \text{ oz/yr}$

Net: $20,512 - 833 = 19,679 \text{ oz/yr} \div 16 \text{ oz/lb} = 1,230 \text{ lbs/yr weight reduction; } 19,679 \text{ oz/yr} \div 20,512 \text{ oz/yr} = 95.9\% \text{ weight reduction}$

Cost savings, not including avoided disposal fees: \$904 /yr: 60% cost savings/ yr

SINGLE-USE: Cost; $\$64.40/\text{case} \times (8.4 + 15) \text{ cases} = \$1,507/\text{yr}$

REUSABLE: Cost 23.95 a dozen; 400 needed, $\div 12 = 34 \text{ dozen}$, $\times \$23.95 = \814 ; $\div 3 \text{ yr/life} = \$271/\text{yr}$

Costs of water, sewer, electricity and soap: 400 dishes washed /day $\div 21 \text{ dishes on a rack} = 19 \text{ racks run/day}$.

Water and sewer for 2.5 gallons/rack is $19 \times 2.5 \text{ gal} = 47.5 \text{ gal/day} \times 365 \text{ days/yr} = 17,338 \text{ gal/yr}$, $\times \$2.47/1000 \text{ gal} = \$42.82/\text{yr}$

Electricity is $.00664 \text{ /rack} \times 19 \text{ racks/day} \times 365 = \$45.77/\text{yr}$

Soap is $3.54 \text{ /rack} \times 19 \text{ racks/day} \times 365 = \$243/\text{yr}$

Net: $\$1,507 - (\$271 + \$43 + \$46 + \$243) = \$904 \text{ cost savings/yr; } \$904 \div \$1,507 = 60\%$

INDIRECT COSTS: A reduction of 62 cu yds of waste /yr theoretically translates into $62 \times \$6.25/\text{cu yd} = \387 /yr . However, contracted hauling volume was not decreased due to implementation of this measure alone. Purchasing and maintenance received a labor decrease due to less management and handling of single-use. Dietary receives a labor increase due to washing of reusable. Implementation of this action was integrated by existing labor. The hospital as a whole did not experience an increase in labor cost.



CHANGE TO RECHARGEABLE BATTERIES

For minimal disruption of patients' sleep, nursing staff used "D" cell flashlights to check on patients during the night. This practice was appreciated by patients but resulted in large quantities of spent batteries. Rechargeable flashlights are now used. Purchased over 4 years ago, the original sample still performs very well.

Volume of waste avoided: 1,272 batteries or .074 cu yd each year; 98% volume reduction

DISPOSABLE "D" cell battery purchased dropped from 120 per month to 14 per month, a decrease of 106 batteries per month.

Net change in battery volume; $106/\text{mo} \times 2.77 \text{ cu"/battery} \times 12 = 3,523 \text{ cu"/yr}$

REUSABLE: $7" \times 2.25" = 17.5 \text{ cu"} \times 18 \text{ flashlights} \div 4 \text{ yr life} = 78.75 \text{ cu"/yr}$

Net: $3,523 - 79 = 3,444 \text{ cu"} \div 46,656 \text{ cu"/cu yd} = .074 \text{ cu yd/yr}$; $3,444 \div 3,523 = 97.76\% \text{ volume reduction}$

Weight of waste avoided: 394 lbs each year; 99% weight reduction

DISPOSABLE: "D" cell weighs 5 oz, $106 \times 5 \text{ oz} \times 12 = 6,360 \text{ oz per year} \div 16 \text{ oz for one pound} = 398 \text{ lb/yr}$.

REUSABLE: rechargeable flashlight weighs 1 lb $\times 18 \text{ flashlights purchased} = 18 \text{ lbs}$, $\div 4 \text{ yr life} = 4.5 \text{ lb/yr}$

Net: $398 \text{ lbs} - 4.5 \text{ lbs} = 393.5 \text{ lb/yr reduction}$; $393.5 \div 398 = 98.9\% \text{ weight reduction}$.

Cost savings, not including avoided disposal fees: \$260 each year: 86% cost savings

DISPOSABLE: $106 \text{ batteries/mo} \times 12 = 1,272 \text{ /yr} \times 23.74 \text{ ea} = \302 /yr

REUSABLE: \$207 was spent purchasing 18 reusable flashlights.

Flashlights are guaranteed for one year, but a four year life has been experienced. Over four years, 5,088 batteries and \$1,208 in disposable battery purchase cost is avoided. Electricity used to recharge the batteries is reported insignificant compared to total hospital usage.

Net: $\$1,208 - \$207 = \$1,041 \div 4 \text{ years for an average of } \$260 \text{ saved each year}$; $\$1,041 \div 1,208 = 86.2\% \text{ cost reduction}$

INDIRECT COSTS: Currently, hospitals must manage alkaline batteries as hazardous waste. Significant reduction in volume and weight reduces disposal costs.

Issues:

Staff must be trained on use of recharger. Electrical outlets must be convenient for nursing staff. Rechargeable flashlights with "low battery" indicators are recommended. With these measures in place, implementation has been successful.

Note: Minnesota statute 115A.9155 applies to disposal of industrial batteries. Mercuric oxide and silver oxide as well as nickel-cadmium and lead-acid batteries purchased for use by government, industry, communications and medical facilities are covered. Manufacturers selling these batteries to these facilities are responsible for ensuring a system of collection and processing of these batteries by **August 1, 1990**.

Pilot collection for all other rechargeable batteries and appliances (primarily from households) must be in place by **April 15, 1992**. Rechargeable tools and appliances must have a rechargeable battery that can be easily removed after **July 1, 1993**.

Alkaline batteries sold in Minnesota can contain no more than 0.025 percent mercury by battery weight after **February 1, 1992**. Although rechargeable batteries result in substantially less solid waste than their alkaline or carbon-zinc counterparts, it is difficult to compare the complete environmental impact of these three battery types. However, in Minnesota rechargeable batteries are subject to mandatory collection which ultimately results in recycling or controlled hazardous waste disposal while low-mercury and carbon-zinc batteries can be disposed in municipal solid waste, ending up in a landfill or incinerator.



USE REUSABLE, NOT SINGLE-USE, PITCHERS ON PATIENT FLOORS

Nurses must have individual pitchers of water available for patients on each floor of the hospital. Reusable, color coded pitchers for each department are now used instead of single-use ones.

Volume of compacted waste avoided: 19 cu yd /yr; 99% volume reduction

SINGLE-USE: The hospital threw out 5,500 single-use pitchers every year, 11 cases of 500/case. Assembly of container and handle required, separate components.

The volume of one container ($\pi r^2 \times h = v$); $3.14 \times 2.55 \times 8 = 157 \text{ cu"}.$ $\times 5,500 \text{ pitchers/yr} = 863,500 \text{ cu"}.$

Handle - solid plastic, must be assembled, not autoclavable (steam sterilization), case $80" \times 23.5" = 1,880 \text{ cu"} \times 11 \text{ cases/yr} = 20,680 \text{ cu"}/\text{yr}$

Lid - solid plastic, not autoclavable, case $60" \times 14" = 840 \text{ cu"} \times 11 \text{ cases/yr} = 9,240 \text{ cu"}/\text{yr}$

$863,500 + 20,680 + 9,240 = 893,420 \text{ total cu"}/\text{yr}$, minimum volume

REUSABLE: The volume of the autoclavable, reusable pitcher is $170 \text{ cu"}.$ It has a minimum life expectancy of 3 years. 180 were purchased. $180 \times 170 \text{ cu"} = 30,600 \text{ cu"}.$ every 3 years; $\div 3 = 10,200 \text{ cu"}/\text{yr}.$

Net: $893,420 \text{ cu"} - 10,200 \text{ cu"} = 883,220 \text{ cu"}/\text{yr} \div 46,656 = 18.9 \text{ cu yd/yr}$ volume reduction;

$883,220 \div 893,420 = 98.8\%$

Weight of waste avoided: 414 lbs; 94% weight reduction

SINGLE-USE: One 500 count pitcher case has the following weights:

Pitchers, 10 lbs

Handles, 20 lbs

Lids, 10 lbs

$40 \text{ lbs} \times 11 \text{ cases used /yr} = 440 \text{ lbs/yr}$

REUSABLE: Pitcher weighs 7 oz $\times 180 \text{ purchased} \div \text{min. 3 yr life} = 420 \text{ oz} \div 16 \text{ oz/lb} = 26 \text{ lbs/yr}.$

Net: $440 - 26 = 414 \text{ lbs avoided /yr.}; 440 - 26 \div 440 = 94.1\%$

Cost savings, not including avoided disposal fees: \$1,445 /yr; 81% savings /yr

One 500 count case of each of the following costs:

Pitchers, \$49

Handles, \$69

Lids, \$43

SINGLE-USE: Cost = $\$161 \times 11 = \$1,771 / \text{yr} = \$148 / \text{mo}.$

REUSABLE: Cost = $\$1.77 \text{ ea} \times 180 \text{ needed} = \$318, \div 3 \text{ yr life cycle} = \$106 / \text{yr} = \$8.83 / \text{mo}.$

Water, electricity and soap is calculated to cost approximately \$225 /yr

Net: Single-use $(\$148 \times 12) - (\$8.83 \times 12 + \$225) = 1,445/\text{yr}$ savings

$\$1,445 \div \$1776 = 81\%$ savings /yr

INDIRECT COSTS: There was a decrease of labor in ordering, stocking and delivering for purchasing and maintenance departments. No significant labor change to get reusables to kitchen because taken with other food cart items. Increase in loading/unloading dishwasher. No change in overall staff for the hospital due to implementation of this action.

Issues:

Color-coding assures pitchers are returned to correct department. Reusable pitchers are stackable and are stored where single-use pitchers used to be kept.



CHANGE FROM DISPOSABLE TO REUSABLE UNDERPADS

When nursing staff changed from plastic-lined, fiber-filled disposable underpads used on patient beds to a reusable cotton underpad, patients reported an increase in comfort.

Volume of waste avoided: 44 cu yds each year: 92% volume reduction

SINGLE USE: 300 fewer cases of disposable pads are used each year, the cases measure 21" x 14" x 15" = 4410 cu" /case x 300 = 1,323,000 cu" ÷ 46,656 cu"/cu yd = 28 cu yd. This volume represents manufacturers shipping volume, a minimum volume for the product. Actual disposal volume after use was observed to be a minimum of 70% greater. 28 cu yd ship. vol. x 70% = 19.6 cu yd., 28 cu yd + 19.6 cu yd = 47.6 cu yd/yr

REUSABLE: Each pad measures 24" x 36" x 1/2" = 432 cu in., 768 pads were purchased. Pad life is estimated to be a minimum of 2 years. 432 cu in. x 768 = 331,776 cu in of waste every 2 years, ÷ 2 = 165,888 cu in of waste/yr. 165,888 ÷ 46,656 cu in/yd = 3.55 yards/yr. When worn out, these pads will be reused as rags and rag pads. When they are eventually thrown out net waste volume will be 47.6 cu yds - 3.55 cu yds = 44.05 cu yds net volume reduction/yr.

$47.6 - 3.55 \div 47.6 = 92.5\%$ volume reduction/yr

Weight of waste avoided: 5,537 lbs each year: 97% weight reduction

SINGLE-USE: Unused, disposable pads from one case weigh 19 lbs; 300 x 19 lbs = 5,700 total lbs. Due to fluid absorption, actual disposal weight would be higher. Minimum weight used.

REUSABLE: 6.8 oz each, 768 purchased for 2 yrs = 2,611.2 oz/yr ÷ 16 oz/lb = 163.2 lbs/yr

Net: 5,700 lbs - 163 lbs = 5,537 lbs net weight reduction/yr

$5,700 - 163 \div 5,700 = 97\%$ weight reduction/yr

Cost savings, not including avoided disposal fees: \$5,021 each year: 67% cost reduction

SINGLE-USE: Approximately 16,000 single-use pads, a cost of \$7,466, were thrown out each year.

REUSABLE: \$4,440, reusable pad purchase cost ÷ 2 yr pad life = \$2,220 /yr plus \$225 in water, soap and electricity/yr = \$2,445/yr.

Net: \$7,466 - \$2,445 = \$5,021 /yr cost savings ÷ \$7,466 = 67% cost reduction/yr

Indirect costs: Reduction in disposal of 44 cu yds of single-use pads at \$6.25 per cu yd = \$275/yr. However, this figure was not included in savings because contracted hauling volume for the facility was not changed. Labor cost of purchasing, checking-in, moving, storing and disposing of 16,000 single-use pads/ yr decreased for purchasing and maintenance departments. Labor cost of washing and folding reusable pads increased for laundry department. These changes were not incorporated into the cost figure because, though labor for individual departments changed, labor costs for the hospital as a whole did not change. This action was integrated by existing staff.



EXIT SIGN CONVERSION

There are 18 exit signs throughout the facility, all lit continuously. Existing incandescent bulb sockets were converted to fluorescents. Fluorescent bulbs were found to last 10 times longer (2.5 yrs) than the hospitals incandescent exit sign bulbs (1/4 of one yr). Although most exit signs have 2 incandescent bulbs per exit sign, the hospitals fixtures contained one. It is worthy to note that conversion to fluorescents was still beneficial.

Percent reduction of this waste stream: 89%

Incandescent count; 67 used/yr in facility

Fluorescent count; 18 needed for 2.5 yr; 7.2/yr; 89% count reduction

Volume of waste avoided: .0034 cu yd; 80% volume reduction of exit lighting waste

15-watt incandescent bulbs = 3 cu" x 67 = 201 cu"/yr

7-watt fluorescent bulb = 3.75 cu" x 18 used in 2.5 yr = 27 cu"/yr

Ballast; 4 cu", life 5 yrs, 1 yr = 19% of total life, 4 cu" x 18 count = 72 x 19% = 14 cu"/yr

Net: 201 - 27 - 14 = 160 cu" ÷ 46,656 cu"/yd = .0034 cu yd/yr

201 cu" - (27 + 14 cu") ÷ 201 = 79.6% volume reduction

Weight of waste avoided: 24 oz; 40% weight reduction of exit lighting waste

15-watt incandescent bulb; .8 oz x 67/yr = 54 oz/yr

7-watt fluorescent bulb; 1.15 oz x 18 bulbs for 2.5 yr ÷ 2.5 = 8.3 oz/yr:

Ballast; last 45,000 hrs (5 yrs); magnetic ballast wt. 7 oz; 19% life use/yr; 19% x 7 oz = 1.33 oz/yr/fixture.

Net: 18 x 1.33 = 24 oz/yr for total

54 oz/yr - (8.3 + 24) ÷ 54 = 40%

Cost savings, not including avoided disposal fees: \$6/yr: 11% /yr cost savings

Incandescent bulbs cost \$0.64 ea x 67 = \$43/yr

Fluorescent bulbs cost \$2.50 ea x 18 = \$45 for 2.5 yrs, \$18/yr

Retrofit kits cost \$12.70 ea x 18 = \$228; conservative 10 yr life = \$23/yr

Electricity cost savings: \$3.85; 46% electricity cost savings

Incandescent; \$.05 /kWh x 15 watts = \$01.01 /1000hrs. x 8.760 (8760 hrs/yr) = \$8.45 /yr

Fluorescent: \$.05 /kWh x 8 (7 watts for bulb + 1 watt for ballast) = .525 /1000hrs x 8.76 = \$4.60

Net: (\$43 + \$8.45) - (\$18 + \$23 + \$4.60) = \$5.85/yr

\$5.85 ÷ \$51.45 = 11.4% /yr cost savings

INDIRECT COSTS: Labor - Each bulb change costs \$8 in labor. Replacing 67 incandescents costs \$536/yr.

Replacing 18 fluorescents every 2.5 yrs costs \$144; or \$58/yr. Net labor cost change; \$478 savings. However, no staff changes were made at the hospital as a direct result of implementation of this action.

ISSUES:

Although the hospitals' incandescent bulbs listed a 2,500-hour life, that proved to be a maximum. Although fluorescents listed a 10,000-hour life, in continuous-burn applications they have lasted over 2 years (22,000 hrs).

Loop type PL and straight tube mini bi-pin fluorescent lamps are both available for exit sign conversion.



REPLACE INCANDESCENT FLOODLIGHTS WITH FLUORESCENT FLOODLIGHTS

During remodeling, the hospital installed 87 compact fluorescent, recessed ceiling floodlights instead of recessed incandescent floodlights. Reported benefits of the change were source reduction, less heat build-up, lower maintenance costs and improved light quality.

The fixtures have been in place over 2 years. No bulbs have burned out. Approximately half are continuously lit and half are on a computerized timer.

Volume of uncompacted waste avoided: .1 cu yd; 94% volume reduction

Incandescent; a 60-watt bulb measured 7 cu" displacement, life 1000 hrs

Fluorescent; a 13-watt bulb measured 4 cu" displacement, life 22,000 hrs (over 2 yrs)

Ballast; last 45,000 hrs (5 yrs) and measures 8.9 cu".

Usage for 45,000 hours of one light:

Incandescent; 696 bulbs x 7 cu" = 4,872 /yr cu"

Fluorescent; 34.8 bulbs x 4 cu" = 139 cu"/yr

Ballast, 1 = 8.9 cu"; 5 yr life; 87 fixtures; $87 \div 5 = 17.4$ prorated use/yr; $17.4 \times 8.9 = 155$ cu"/yr

Net: $4,872 - 139 - 155 = 4,578$ cu" avoided $\div 46,656$ cu"/yd = .098 cu yd/yr

$4,872 - 155 \div 4,872 = 94\%$

Weight of waste avoided: 26.5 lbs/yr; 64% weight reduction

Incandescent; 60 watt bulb weighs .95 oz x 696 used/ yr = 661 oz/yr waste

Fluorescent; a 13 watt bulb weighs 1.75 oz; .5 life used /yr x 87 fixtures = 76.5 oz/yr/waste

Ballasts; life 45,000 hrs: Magnetic ballast weighs 9.75 oz; 19% life used /yr = 1.85 prorated oz/yr x 87 lights = 161 oz/yr waste: Electronic ballasts weighs 2.30 oz; 19% life used /yr = .437 oz/yr x 87 lights = 38 oz/yr waste.

<Fluor. bulb (76.5) + Mag. bal. (161) = 237.5 oz/yr

<Fluor. bulb (76.5) + Elec. bal. (38) = 114.5 oz/yr

Net: $661 - 76 - 161 = 424$ oz $\div 16$ oz/lb = 26.5 lbs/yr

$661 \text{ oz} - 238 \text{ oz} \div 661 \text{ oz} = 64\%$

Cost savings, not including avoided disposal fees: \$268 /yr: 36% cost savings /yr

<Incandescent bulbs cost \$0.64 ea x 696 = \$445/yr

<Fluorescent bulbs cost \$2.51 ea x 34.8 prorated bulbs/yr = \$87/yr

<Ballast cost \$12.70 ea for conservative 10 yr life = \$1.27 prorated cost/fixture x 87 fixtures = \$110/yr

<Electricity savings; 60 watt incandescents (cost \$3 /1,000 hrs) were replaced by 14 watt fluorescent (cost \$.70 / 1000 hrs); $8760 \text{ hrs in one yr} \div 1000 = 8.76$ kwatt; Yearly incandescent cost $\$3 \times 8.76 = \$26/\text{yr}$; Yearly fluorescent cost $\$0.70 \times 8.76 = \$6/\text{yr}$; $\$26 - \$6 = \$20/\text{yr}$ savings = **77% electricity cost savings**.

Net: $(\$445 + 26) - (87 + 110 + 6) = \268 cost savings/yr; $\$268 \div (\$445 + \$26) = 36\%$ savings/yr

INDIRECT COSTS: Labor for changing incandescent bulbs; $\$8/\text{change} \times 696 = \$5,568/\text{yr}$. Labor for changing fluorescent bulbs; $\$8/\text{change} \times 34.8 = \$278/\text{yr}$. A significant labor decrease for the maintenance department results from this action. However, no change was made in staff due to this action alone.

Issues:

Maintenance staff discovered that some compact fluorescent units are sold with the ballast and bulb glued together as one unit. When the bulb burns out the entire lens and ballast must be thrown out. To avoid this unnecessary waste and expense, make sure the bulbs themselves can be replaced.



USE EFFICIENT FLOW SHOWER HEADS

There are 33 showers in the hospital and long-term care center. By changing to efficient-flow fixtures, the hospital conserves water, energy and capital.

The old shower heads used 3.5 gallons /min.

The new shower heads use 1.5 gallons /min.

Volume of waste water avoided: 103,000 gallons /year: 57% volume reduction

Approximately 2,100 showers lasting an average of 7 minutes each are taken at the facility each year.

OLD $< 3.5 \text{ gal./min} \times 7 \text{ min} = 24.5 \text{ gal/shower} \times 2,100 \text{ showers} = 51,450 \text{ gal/yr}$

NEW $< 1.5 \text{ gal./min} \times 7 \text{ min} = 10.5 \text{ gal/shower} \times 2,100 \text{ showers} = 22,050 \text{ gal/yr}$

Net: 29,400 gallons saved; $29,400 \div 51,450 = 57\%$ volume reduction

Cost savings, including avoided waste water treatment cost: \$89/yr: 57% cost reduction

Water cost is \$1.70 /1000 gal. Sewer charge is pegged to the number of gallons of water used and is \$.77 /1000 gal. Total cost of water used is \$2.47 /1000 gal.

$29,400 \div 1000 \times \$2.47 = \$73 \text{ /yr}$

It takes 22 watt-hours to heat one gallon of water to 120°F $\times \# \text{ gal heated } (29,400 \div 2 = 14,700 \text{ gal heated}) =$

$323,400 \div 1000 \text{ (for kilowatt hours)} = 323.4 \text{ kilowatt hours} \times \text{watt hourly rate of } \$0.05 \text{ /kilowatt} = \16 ; \$73 water and sewer savings + \$16 electricity savings = \$89

Old, $51,450 \text{ gal/yr} \times \$2.47/1000 \text{ gal} = \$127/\text{yr}$

New, $22,050 \text{ gal/yr} \times \$2.47/1000 \text{ gal} = \$54/\text{yr}$

Net: $\$127 - \$54 \div \$127 = 57\%$ cost reduction

ISSUES:

Although shower heads were replaced by efficient-flow fixtures, the timing of replacement was determined by existing shower head life cycle maintenance. The hospital replaces shower heads when corrosion and mineral build up impair function. Old shower heads are given away for reconditioning and reuse. Aerators are used on faucets.



TOXICITY REDUCTION BY DEVELOPING SOLUTION CHANGE

X-ray image quality was not compromised when the hospital changed to non-toxic "T2" chemistry. The new developer contains no hexavalent or trivalent chromium, is 95% acid-free, has no irritating fumes and does not damage clothing. The fixer is borate-free and the developer starter has a neutral Ph.

Percent reduction of this toxic waste stream: 100%

The hospital no longer uses acidic developer or fixer.

Volume of toxic waste avoided: 810 gallons /year

10 gallons of fixer is used every 18 days = 203 gal/yr

10 gallons of developer is used every 6 days = 608 gal/yr

Cost savings, not including avoided disposal fees: Break even

Issues:

Improved worker safety and eliminating over 800 gallons of toxic waste were the reasons for the change. The product is manufactured by White Mountain Imaging, Webster, NH 03303 (603) 648-2124 and has medical supply distributors nationwide.



CHANGE FROM STRAIGHT TO CIRCULAR TUBES FOR X-RAY VIEW BOXES

Some X-ray view box models contain four straight fluorescent X-ray tubes, and all must be replaced when one bulb burns out. Updated versions contain only one circular tube. Life expectancy is the same, 2 years.

Volume of waste avoided: .01 cu yd/yr: 24% volume reduction /yr

STRAIGHT TUBE: measures 1" dia x 17.25" long = 54.2 cu", x 4 tubes /fixture = 217 cu" x 18 fixtures ÷ 2 year life = 1,953 cu"/yr.

CIRCULAR TUBE: measures 1.25" dia x 33.5" circum = 165 cu", x 18 fixtures ÷ 2 year life = 1,485 cu"/yr.

Net: 1,953 cu" - 1,485 cu" = 468 cu", ÷ 46,656 cu"/cu yd = .01 cu yd/yr

1,953 cu" - 1,485 cu" ÷ 1953 cu" = 24% volume reduction

Weight of waste avoided: 1 lb/yr: 22% weight reduction

STRAIGHT TUBE: 2.1 oz ea x 4 tubes/fixture x 18 fixtures ÷ 2 year life = 76 oz/yr

CIRCULAR TUBE: 6.5 oz ea x 18 fixtures ÷ 2 year life = 59 oz/yr; 76 - 59 = 17 oz, ÷ 16 oz/lb = 1.1 lb

17 oz ÷ 76 = 22% weight reduction

Cost savings: \$71 /yr: 44% annual cost savings

STRAIGHT TUBE: 4 required /fixture x \$2.24 ea x 18 fixtures = \$161

CIRCULAR TUBE: 1 required /fixture x \$4.97 ea x 18 fixtures = \$90

Net: With replacement life the same, \$161 - \$90 = \$71/yr, \$71 ÷ \$161 = 44% cost savings /yr

INDIRECT COSTS: Less labor is required to service circular tube units than 4 tube units.



CHANGE TO REUSABLE CUPS

Use of single-use styrofoam cups by staff was eliminated. The hospital provided high quality, reusable plastic mugs embossed with the hospital's logo for all employees. Employees are responsible for their own mugs. Reusable cups are provided for all meetings. The hospital plans to phase out single-use cups in the facility in 1993.

Volume of waste avoided: 26 cu yd/yr: 99.8% volume reduction

SINGLE-USE CUPS: Shipping volume is 6,084 cu" /case of 1000; Measured disposal volume of 50 cups is 1,287 cu"; $20 \times 1,287 = 25,740$ cu" for 1000 cups (76% increase from shipping to disposal volume.) A minimum of 1000 single-use cups were used/week. Allowing for settling in a dumpster, 90% of the measured disposal volume is used for calculations. $90\% \times 25,740 \text{ cu}'' = 23,166 \text{ cu}'' \times 52.14 \text{ wks/yr} = 1,207,941 \text{ cu}''/\text{yr}$

REUSABLE CUPS: Since cups are the property of individual staff, and they must be replaced at their own expense, it is not anticipated that they will be thrown away. However, a 4-year functional life was assigned to the cups. Cups measure 3" dia. x 5" ht = 35.4 cu"; 200 cups were distributed, $\div 4 \text{ yr life} = 50$ disposed/yr; $35.4 \text{ cu}'' \times 50 = 1,770 \text{ cu}''/\text{yr}$

Net: $1,207,941 \text{ cu}''/\text{yr} - 1,770 \text{ cu}''/\text{yr} = 1,206,171 \text{ cu}''/\text{yr} \div 46,656 \text{ cu}''/\text{yd} = 25.85 \text{ cu yd/yr}$; $1,206,171 \div 1,207,941 = 99.8\%$ volume reduction

Weight of waste avoided: 69 lbs/yr: 82% volume reduction

SINGLE-USE: 7 lbs /case of 1000; 12 cases/yr x 7 lbs = 84 lbs/yr

REUSABLE: 4.75 oz x average of 50 disposed/yr = 237.5 oz, $\div 16 \text{ oz/lb} = 14.8 \text{ lbs/yr}$

Net: $84 \text{ lbs} - 14.8 \text{ lbs} = 69.2 \text{ lbs/yr}$ avoided; $69.2 \div 84 = 82.3\%$ volume reduction

Cost savings, not including avoided disposal fees: \$94 /yr: 58% cost savings/ yr

SINGLE-USE: Cost \$13.50/case x 12 = \$162/yr

REUSABLE: Cost \$1.35 ea x 200 = \$270, however future cost of purchasing single-use cups is eliminated. If the hospital decides to purchase new cups in 4 years (estimated life) instead of having employees purchase their reusable cups as is now the policy, the hospital cost savings would be $\$162 \times 4 = \648 , $- \$270 = \378 savings over 4 yr, = \$94 /yr savings; $\$94 \div \$162 = 58\%$ cost reduction.

INDIRECT COSTS: 26 cu yd waste abatement x \$6.26/yd = \$162 cost reduction. However, due to implementation of this measure alone, no change was made in the hospital's contracted hauling volume. The maintenance department has a considerable reduction in labor expense due to decrease in volume and weight of waste managed. Staff are responsible for washing out their own mugs, 1 minute /day. No staff changes.



CHANGE TO BULK MILK DISPENSER

Milk was served to patients in half-pint, plastic coated, gable top milk cartons. The containers composed a major element of food service's waste. Food service staff reduced this by changing to reusable cups and a bulk milk dispenser. An average of 205 milk cartons were thrown out each day, 74,825 each year.

Volume of waste avoided: 1.9 cu yds/yr: 7% volume reduction

SINGLE-USE: One 8 oz carton takes 17 cu in x 74,825/yr = 1,272,025 cu in/yr. Cartons are plastic coated cardboard, not locally recyclable. Actual disposal volume is greater than stacked volume used here.

BULK CONTAINER: One 3-gallon (128-oz) container measures 11.5" x 8.25" x 8" = 759 cu in. Plastic liner separates from cardboard box, cardboard is locally recyclable. 8 oz x 74,825 = 598,600 oz/yr, ÷ 128 oz/gal = 4,676.6 gal/yr, ÷ 3 gal/container = 1,559 containers. 759 cu in x 1,559 = 1,183,170 cu in/yr.

Reusable glass measures 3.25" dia x 3.25" high = 8.58 cu in ea. x 105 disposed/yr = 901 cu in/yr

Single-use lid measures 3.25" dia x .001" thick = .0026 cu in ea. x 205 used/day x 365 = 195 cu in/yr; 60% increase in disposal volume observed, 60% x 195 = 117, + 195 = 312 cu in disposal volume/yr

Net: carton use, 1,272,025 cu in/yr - Bulk use (1,183,170 + 901 + 312) = 87,642 cu in/46,656 cu in/cu yd = 1.88 cu yd, 6.89%

The cardboard is recycled but 59,158 cu in of currently non-recyclable plastic remains. Because the cardboard of the bulk containers is locally recyclable while the cartons are not, 26 cu yds/yr, a 95% volume reduction, is kept from the dumpsters through the use of bulk milk.

Weight of waste avoided: 740 lbs/yr: 32% weight reduction

SINGLE-USE: One 8-oz carton weighs .5 oz x 74,825/yr = 37,415 oz, ÷ 16 oz/lb = 2,338 lbs/yr.

BULK CONTAINER: One 3-gallon (128-oz) container weighs .81 lbs of cardboard and .015 lb of plastic for a total of .825 lbs, x 1,559 containers/yr = 1,286 lbs/yr.

Reusable glass weighs 2.1 oz ea., 205 used, life 2 yrs = 103 disposed/yr. 103 x 2.1 oz = 216 oz ÷ 16oz/lb = 13.5 lbs/yr

Single-use glass cover weighs .20 lb for 50, 205 used/day 365 = 74,825/yr ÷ 50 = 1,497, x .20 lb = 299 lbs/yr

Net: 2,338 lbs/yr - 1,286 - 13.5 - 299 = 739.5 pounds prevented, ÷ 2,338 lbs = 31.6% weight reduction due to source reduction.

Because virtually all of the weight of the bulk milk containers is recycled, the change represents a 99% disposal weight reduction due to recyclability.

Cost: A \$98/yr increase: 1% cost increase

SINGLE-USE: Cost 12¢ a carton x 74,825/yr = \$8,979/yr

BULK CONTAINER: One 3-gallon (384-oz) container costs 11.6 cents/serving; 74,825 servings ÷ 48 = 1,559 3 gal containers/yr, x \$5.57 = \$8,683/yr. The dispenser furnished by the milk distributor

Reusable glasses cost \$48/case, 80 to a case or 604 ea., 205 used/day. Two year life; 103 x .60 = \$62/yr

Single-use cup lids are used to cover glasses, \$9.15 a case of 3,000 = .003054 ea x 205 used/day = .624 x 365 = \$228/yr

Washing, soap, water and energy use for 8 additional racks run/day = \$104/yr

Net: \$8,683 + \$62 + \$228 + \$104 = \$9,077/yr

\$8,979 for cartons - \$9,077 for bulk = -\$98, a 1% cost increase

INDIRECT COSTS: Because the hospital's recyclable material is picked up without charge and the bulk milk container is recyclable, 26 cu yds of waste is not disposed. 26 cu yd x \$6.25 cu yd = \$162/yr savings, however implementation of this measure alone did not result in a decrease in contracted hauling volume for the facility. Labor handling 75,000 cartons is replaced by handling 1,600 three-gallon containers plus the 75,000 glasses and lids a year. More labor is spent using bulk milk; however the change was integrated by existing staff.

Issues: Bulk milk may be more cost effective at other facilities. Cartons usually range in price from 12 to 13 cents each. They are 12 cents for this facility. 3-gallon bulk can be less than \$5.57 each.



CHANGE TO MILK POUCH

The cafeteria changed from 8 oz milk cartons to milk pouches. Staff punctures the self-sealing bag with a small straw before serving.

Volume of waste avoided: 6.2 cu yd/yr: 87% volume reduction

CARTONS: 50 cartons used/day x 365 = 18,250 cartons/yr x 17 cu in/carton = 310,250 cu in/yr. Straws are paper-wrapped, a box of 400 measures 9" x 5.5" x 6" = 279 cu in., $18,250 \div 400 = 45.6$ boxes of straws/yr, x 279 cu in/box = 12,729 cu in/yr.

$310,250 + 12,729 = 322,979$ cu in/yr

PLASTIC POUCHES: 50 pouches used/day x 365 = 18,250 pouches/yr x 2.3 cu in = 41,975 cu in/yr. Straws are .056194 cu in ea. including packaging, $18,250 \times .056194 = 1025.5$ cu in/yr.

Net: $41,976 + 1026 = 43,002$ cu in/yr

$322,979 - 43,002 = 289,977$ cu in/ $46,656$ cu in/yd = 6.2 cu yd/yr, 87% volume reduction

Weight of waste avoided: 472 lbs/yr: 78% weight reduction

CARTONS: 18,250 cartons/yr at .5 oz = 9,125 oz/yr., 18,250 straws, 400 weigh 12.8 oz, $18,250 \div 400 = 45.6$, x 12.8 oz = 584 oz., $9,125 + 584 = 9,708$ oz/yr

PLASTIC POUCHES: 18,250 pouches/yr at .11 oz = 2,007 oz/yr., 18,250 straws, 400 weigh 3.3 oz, $18,250 \div 400 = 45.6$, x 3.3 oz = 150 oz., $2,007 + 150 = 2,157$ oz/yr

Net: $9,708 - 2,157 = 7,551$ oz $\div 16$ oz/lb = 472 lbs/yr.; $7,551$ oz $\div 9,708$ oz = 77.8 % weight reduction

Cost savings: \$276/yr: 12% cost reduction

CARTONS: Cost 124 each x 18,250 = \$2,190; Straws cost \$2.03 for 400, $18,250 \div 400 = 45.6$, x \$2.03 = \$92.57/yr; $\$2,190 + \$93 = \$2,283$ /yr

PLASTIC POUCHES: Cost 114 each x 18,250 = \$2,007; Straws are included;

Net: $\$2,283 - \$2,007 = \$276$ /yr; $\$276 \div \$2,283 = 12\%$ cost reduction

INDIRECT COSTS: A reduction in disposal of 6.2 cu yd of waste x \$6.25 = \$39/yr. Contracted hauling volume was not changed for the facility due to implementation of this measure alone. More pouches fit into a smaller space in the walk-in cooler, more efficiently using space. No appreciable labor change for dietary department. Due to less waste, there is a labor savings for the custodial department. No staff changes.



REUSABLE DECUBITUS CARE MATTRESSES

"Egg-crate" mattresses are designed to distribute pressure so that decubitus ulcers do not develop on patients' skin. Typical egg-crate mattresses cannot be reused by another patient. The reusable mattresses accomplish the same goal but create much less waste, do not require mattress pads and save money.

Volume of waste avoided: 43 cu/yds: 97% volume reduction

SINGLE USE: 26 cases of 12 thrown out each year = 312; 30" x 80" x 2.75" ea = 6,600 cu" x 312 used/yr = 2,059,200 cu"/yr

REUSABLE: The dense foam decubitus-care insert is warranted for 5 years. They measure 27" x 72" x 3.25" = 6,318 cu in. Eight were purchased to serve the average need. Standard egg-crate mattresses will be used if need exceeds supply of reusable. Over time, the hospital will replace all standard mattresses with reusable, Bio Gard Therapeutic Mattresses. To be conservative, a 1-year life was assigned to the decubitus care component of the mattress, even though it is warranted for 5 years.

8 needed ÷ 1 year life = 8 /yr, x 6,318 cu" ea = 50,544 cu"/yr. Only the volume of the decubitus-care insert and single-use egg-crate overlay are used for calculations. Note: The whole Bio Gard mattress has replaceable components, so disposal volume is likely to be less than that of a whole, standard mattress.

Net: 2,059,200 - 50,544 = 2,008,656 cu" ÷ 46,656 cu"/cu yd = 42.9 cu yd/yr; 2,008,656 ÷ 2,059,200 = 97% volume reduction.

Weight of waste avoided: 601 lbs: 96% weight reduction

SINGLE-USE: 2 lb x 312 = 624 lb

REUSABLE: 2.8 lb for decubitus care portion x 8 /yr = 22.4 lb

624 - 23 = 601 lb/yr; 601 ÷ 624 = 96% weight reduction

Cost savings, not including avoided disposal fees: \$879 /yr: 62% cost reduction /yr

SINGLE-USE: Cost \$4.56 ea x 312/yr = \$1,423 /yr

REUSABLE: Cost of entire mattress \$230 each x 8 = \$1,840 ÷ 5 yr life = \$368 /yr; Cost of inserts, \$22 ea x 8/yr = \$176 /yr

Net: \$1,423 - (\$368 + \$176) = \$879 cost reduction; \$879 ÷ \$1,423 = 62% cost reduction

INDIRECT COSTS: Volume and weight waste reduction results in lower disposal costs, (43 cu yd x \$6.25/yd = \$269); however, contracted hauling volume was not decreased due to implementation of this measure alone.

Purchasing and maintenance departments have decreased labor demand because of the change. No staff changes resulted, however, so overall labor costs for the hospital did not change. The reusable decubitus-care mattress does not require use of mattress pads. When all old-style mattresses are eventually changed over, the change will result in an additional \$2,445 /yr savings, the current cost of using underpads.



REUSABLE DIAPERS

Although the hospital supported this action, implementation was delayed. Several styles of reusable diapers were considered; however, commercial reusable diapers that would hold up to the hospital's laundry procedures, did not stain with meconium and were consistent in preventing leakage were not found. The hospital is continuing its search for a reusable diaper.



REUSABLE SOUP BOWLS

The dietary department is phasing in the use of reusable table ware over time. This is done to assure that existing staff can integrate the changes. The change to reusable bowls from single-use ones looks functional at this point, and implementation is expected to take place.



REINK PRINTER RIBBONS

Reinking of ribbons and remanufacture of photocopy and printer cartridges was identified as a viable source reduction measure. The hospital is currently researching remanufactures and expects savings of 33 to 50% over current costs.



SENIOR CITIZENS MAKE USE OF OLD ELECTRONIC EQUIPMENT

The hospital collects from others and also gives its own old electronic equipment to nursing home residents who disassemble, sort and recycle the components. Though this use of old electronic equipment results in the end of its functional life, reuse of the equipment in this way gives valued activity to the residents and accomplishes recycling of the components.

In ADDITION, the hospital has had these source reduction measures in place:

REUSABLE BED PANS

REUSABLE EMESIS BASINS

REUSABLE MALE URINAL BASINS

REUSABLE PATIENT EATING UTENSILS

REUSABLE STERILIZATION TRAYS

DOUBLE-SIDED PHOTOCOPYING

REUSABLE ISOLATION AND SURGICAL GOWNS



ADDITIONALLY:

As a result of the hospital's source **reduction and recycling** efforts, contracted garbage hauling services were decreased from one 6 cu yd dumpster 5 times a week to 2 times a week. This is a 60% decrease in contracted garbage hauling service volume. Yearly garbage hauling expense decreased \$5,244.

All changes took place without additions to hospital staff. In fact, after implementing their integrated waste management program the hospital eliminated two staff positions in the maintenance department.

As a result of reduction actions alone, the hospital is preventing **238 cubic yards** and over **10,700 pounds** of waste. Not including the savings from avoided disposal fees, these actions result in a **\$11,030 yearly cost savings for the hospital.**

When the \$5,244 hauling expense savings due to implementation of reduction and recycling is added to the \$11,030 savings due to reduction, the **total savings for the hospital is over \$16,270** each year.